



Office Use Only

## Missouri Department of Conservation Application for Class II Wildlife Breeder Permit

Complete This Box. Please Print

Name:	Business Name:
Address:	Business Address: (if different)
City, State, Zip:	City, State, Zip:
Home Telephone No.	Work Telephone No.
County:	Email:

**Class II Breeder Permit (Code 545)..... \$250.00**

All elk, elk-hybrids, mule deer & whitetail deer, defined as Class I wildlife in 3 CSR 10-9.230 introduced into a Class I/Class II wildlife breeder operation shall be tagged or marked in a method allowing each individual animal to be uniquely identified. Animals imported into Missouri must come from a herd that is enrolled and has achieved a status two (2) or higher in a United States Department of Agriculture approved or state-sponsored chronic wasting disease monitoring program-two (2) years of surveillance, advancement, and successful completion of program requirements. Animals from within Missouri must come from a herd comprised of animals enrolled in a United States Department of Agriculture approved or state-sponsored chronic wasting disease monitoring program.

List species and numbers of each species to be covered by permit:


☞ Check here if wildlife is held at a location other than above address and then complete Part II on back.

Approval box in lower left corner of the application must be completed by local conservation agent when the following occurs:

1. First time application for Class II Wildlife Breeder permits, including exam certification.
2. When species and / or location is being added or changed from prior year's permit.
3. When going from one type of permit to another, i.e., Wildlife Hobby to Wildlife Breeder, etc...
4. When ownership changes.

Signature constitutes acceptance of all rules pertaining to the permit according to the *Wildlife Code of Missouri Section 3 CSR 10-9.353* and the following conditions:

1. Applicant is aware of Statute 578.023. RSMO, has notified the appropriate local law enforcement agency, and has met all requirements under this statute.
2. Applicant must provide written documentation of proper veterinary care / health certificates.
3. Applicant agrees to assume full responsibility for all costs associated with recapture of any escaped animals.

**Missouri's Sunshine Law requires that permit buyers' names and addresses are public records unless you specifically request that your information be closed.**

☞ Check here if you **do not** wish for your name and contact information made available on mailing lists.

**Read and complete the reverse before signing.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### DO NOT SEND CASH

**Remit by Check, Credit Card Payment (see back) or Money Order to:**

Attn: Commercial Permits  
Missouri Department of Conservation  
P.O. Box 180  
Jefferson City, MO 65102-0180

**ALL PERMITS EXPIRE JUNE 30**

Unless otherwise Provided by the *Wildlife Code of Missouri*

☞ Exam Passed      ☞ Exam Not Passed  
☞ Approved      ☞ Disapproved

By \_\_\_\_\_  
County \_\_\_\_\_  
Date \_\_\_\_\_

DO NOT WRITE IN THIS SPACE  
(For conservation agent's use only)

# READ AND COMPLETE THIS SIDE

## PART 1

If your street address is different from your mailing address please complete this section. Complete address must be provided in case contact by a conservation agent is required. If you live in a rural are, please provide directions to your location.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Directions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## Part II

Location of Wildlife:

Complete this information if wildlife is held at a location other than address on face of application.

Name of person holding wildlife: \_\_\_\_\_

Address where wildlife is located: \_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip: \_\_\_\_\_

County where wildlife is located: \_\_\_\_\_ Within city limits? Yes\_\_\_\_ No\_\_\_\_

If not within city limits give directions to the location of the wildlife, including distances from town, using name or major highway, state road or other location identifiers.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Payment Method

Total Amount Due \$ \_\_\_\_\_

☐ Check Enclosed (make check payable to **Missouri Conservation Department**)

**Check One:** ☐ Visa ☐ MasterCard

Charge my credit card number \_\_\_\_\_

3 Digit Security Code number \_\_\_\_\_ (this number is located on the back of your card)

Phone # \_\_\_\_\_ (**required** on all credit card orders)

Expiration Date \_\_\_\_\_ Signature \_\_\_\_\_

Credit card holder agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer.

Mail application to: **Missouri Department of Conservation**  
**ATTN: Commercial Permits**  
**PO Box 180**  
**Jefferson City, MO 65102-0180**

This is not a permit and does not entitle applicant to operate.